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## **BIB DATA SHEET**

## **CONFIRMATION NO. 5813**

| SERIAL NUM   | NUMBER FILING O   |  |                     |     | CLASS         | GROUP ART UNIT |                                       | ATTORNEY DOCKET |             |  |
|--|---|--|---------------------|-----|---------------|----------------|---------------------------------------|-----------------|-------------|--|
| 10/553,715 04/12/  |   |  |                     | 713 | 24            | 2439           |                                       | ZIO005-219015   |             |  |
|  | RUL   |  | E                   |     |               |                |                                       |                 |             |  |
| APPLICANTS Eileen Chu Hing, Philadelphia, PA;  |   |  |                     |     |               |                |                                       |                 |             |  |
| ** CONTINUING DATA ********************************  This application is a 371 of PCT/US04/11878 04/16/2004  which claims benefit of 60/463,201 04/16/2003  and claims benefit of 60/468,681 05/07/2003  (*)Data provided by applicant is not consistent with PTO records. |   |  |                     |     |               |                |                                       |                 |             |  |
| ** FOREIGN APPLICATIONS ************************************   |   |  |                     |     |               |                |                                       |                 |             |  |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 09/15/2007  |   |  |                     |     |               |                |                                       |                 |             |  |
| Foreign Priority claimed Yes No  |   |  | Met after Allowance |     | STATE OR      | SHEETS         | -                                     |                 | INDEPENDENT |  |
| 35 USC 119(a-d) conditions met ☐ Yes ☑ No<br>Verified and /CHRISTOPHER J   |   |  |                     |     | COUNTRY<br>PA | DRAWING<br>5   | SS CLAI                               | _               | CLAIMS<br>4 |  |
| Acknowledged BROWN/ Examiner's Signature   |   |  |                     |     | FA            | 3              | 12                                    | <u>-</u>        | 4           |  |
| ADDRESS  |   |  |                     |     |               |                |                                       |                 |             |  |
| EILEEN CHU HING<br>ACP 286<br>9099 MAIL SERVICE CENTER<br>RALEIGH, NC 27699-9099<br>UNITED STATES  |   |  |                     |     |               |                |                                       |                 |             |  |
| TITLE  |   |  |                     |     |               |                |                                       |                 |             |  |
| Method And System For Providing A Customized Network   |   |  |                     |     |               |                |                                       |                 |             |  |
|  | FEES: Authority has been given in Paper  No to charge/credit DEPOSIT ACCOUNT  No for following: |  |                     |     |               | ☐ AI           | ☐ All Fees                            |                 |             |  |
|  |   |  |                     |     |               | <b>□</b> 1.    | ☐ 1.16 Fees (Filing)                  |                 |             |  |
| FILING FEE<br>RECEIVED   |   |  |                     |     |               | NT 1.          | ☐ 1.17 Fees (Processing Ext. of time) |                 |             |  |
| 465  |   |  |                     |     |               | •              | ☐ 1.18 Fees (Issue)                   |                 |             |  |
|  |   |  |                     |     |               |                | Other                                 |                 |             |  |
|  |   |  |                     |     |               | ☐ Credit       |                                       |                 |             |  |
|  |   |  |                     |     |               |                |                                       |                 |             |  |